

## APPLICATION FOR EMPLOYMENT

Premium eJuice USA, LLC is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

DEDSONAL I	INFORMATION							
PERSONAL	INFORMATION							۲
FULL NAME:							JOB ID	J2050
Laurel Long							₽	Ö
CURRENT ADDRESS: 4210 Riviera Drive								
CITY:		STATE:		ZIP:				
Louisville		Kentucky		40207				
PHONE NUMBER:		EMAIL ADDRESS:						
502-439-2006		laurellong@ymail.com	1					
			Are You 18 Year	s of Age or Or	der: Yes			
	Haya Yay Eya	Applied to as worked for Drom	sium a luica USA or Vanor Lab	M-			APPLICANT NAME	LAUREL LONG
Have You Ever Applied to or worked for Premium eJuice USA or Vapor Lab:								ᇛ
Do You Have Any Friends, Relatives, or Acquaintances working for Premium eJuice USA or Vapor Lab:								Ë
Have You Ever Been Convicted Of A Felony: No No							MA	6
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	Are		d To Work in the Unted States:	Yes				<b>Q</b>
		Do You Have Reliable Tran	sportation To And From Work:	Yes				
How Did You He	AT POSITION SALES AS  ar About This Position: Online  You Available To Work: Monday, Tuesday, We  You Available To Work: I Can Work Any Shift		ay					
	Hours I Can Work:							5/2
							DATE	05/22/20
References:	Type Personal	Name Chloe Vessels	Phone Number				Ш	
	Professional	Shana Sims						<del>1</del> 8
	Professional	Michael Hasson						
Previous Employer Name Sonic Reason For Leaving	Dyment:  Job Title  Carhop	Supervisor Name	Phone Ni 502412	ımber	REE EMPLOYERS, STARTI Dates of Employment 2017-01-04	NG WITH LAST		FIRST
Wanted to look for differ	ent opportunities				Can We Contact For A R	eference:		
- Valited to look for differ	ent opportunities					res		
Previous Employer Name	Job Title	Supervisor Name	Phone No	ımber	Dates of Employment			
Reason For Leaving								
					Can We Contact For A R	eference:		
Previous Employer Name	Job Title	Supervisor Name	Phone No	ımber	Dates of Employment			
Reason For Leaving					Can We Contact For A R	eference:		